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Auto Insurance Declarations Page

Policy Number TCMKH3HGUP Policy Period From 02/10/2024 12:01AM To 08/10/2024 12:01AM Underwritten By 21st Century Casualty Company 3 Beaver Valley Road Wilmington, DE 19803	Named Insured(s) Leonard Sanchez Margarita Hernandez (626)797-8181 LENNYSANCHEZ@GMAIL.COM 1065 CHEVRON CT PASADENA, CA 91103	Premiums / Fees <table border="0"> <tr> <td>Full Term Policy Premium</td> <td>\$800.00</td> </tr> <tr> <td>Fees*</td> <td>\$2.64</td> </tr> <tr> <td>Total</td> <td>\$802.64</td> </tr> </table> <p style="text-align: right;">Monthly Charge \$133.33</p> <p style="text-align: right; font-size: small;">* See information on additional fees below</p>	Full Term Policy Premium	\$800.00	Fees*	\$2.64	Total	\$802.64
Full Term Policy Premium	\$800.00							
Fees*	\$2.64							
Total	\$802.64							

Household Driver and Resident Information

Are there persons 15 years of age or older not listed below who reside in your household (even if temporarily away from home), or who are guests staying in your home in excess of 90 days, or who regularly operate your vehicle(s) listed below more than 30 days per year? If so, please contact us or update your policy in the self-service portal to add these drivers to your policy.

Name	Years Licensed	Driver Status
Leonard Sanchez	55	Covered
Maria Orellana Sanchez	2	Excluded
Lenny Sanchez	23	Excluded

Name	Years Licensed	Driver Status
Maria Sanchez	20	Covered
Margarita Hernandez	44	Covered

Driver History

Operator	Claim	Citation	Date
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Discounts

Discount Type	Applies to Vehicle(s)
Affinity Discount	3,2,1
Superior Driver Discount	3,2,1

Discount Type	Applies to Vehicle(s)
Good Driver Discount	3,2,1
Multi-Car Discount	3,2,1

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Auto Insurance Declarations Page

Vehicle Information

Veh. #	Year/Make/Model/VIN	Garaging Zip	Lienholder	Additional Interest
1	2003 TOYOTA SIENNA/ 4T3ZF13C53U541515	91103		
2	2013 TOYOTA COROLLA SEDAN/ 5YFBU4E4DP202540	91103	CALIFORNIA CU PO BOX 5131 LAKE FOREST, CA 92630	
3	2006 HONDA CR-V/ JHLRD78866CO63273	91103		

Veh. #	Use	Mileage
1	Pleasure	6,000
2	Pleasure	6,000
3	Pleasure	8,000

2/b



LEONARD SANCHEZ
1065 CHEVRON CT
PASADENA, CA, 91103

Auto Insurance Renewal Billing Statement

Policy Period:

02/10/2024 12:00AM - 08/10/2024 12:00AM

LEONARD, this billing statement includes premium due for an upcoming policy renewal. Please refer to the renewal offer to learn more about any coverage or premium changes that take effect with your new policy term.

Policy Number:	TCMKH3HGUP
Minimum Due:	\$206.64
Policy Premium:	\$802.64
Due Date:	02/10/2024

The first payment for your renewal period will be \$206.64 due on 02/10/2024. The total premium due for your policy over the next six months is \$802.64.

Save time and money! Visit us at **toggle.com** to make a payment or enroll in autopay.
Please detach here and return with your payment

Make checks payable to 21st Century Casualty Company. Please allow for 7-10 days for mailing.

Customer Name	Policy Number
LEONARD SANCHEZ	TCMKH3HGUP

Amount Due	Due Date	Amount Paid
\$206.64	02/10/2024	\$

21st CENTURY CASUALTY COMPANY
P.O BOX 894722
LOS ANGELES CA 90189-4722

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72016624021000911009112919602272021024022024000206640000000000

NAMED INSURED(S)

Leonard Sanchez
Margarita Hernandez

EFFECTIVE DATE

02/10/2024

EXPIRATION DATE

08/10/2024

VEHICLE(S)

YEAR / MAKE / MODEL

2003 TOYOTA SIENNA VAN 2WD

2013 TOYOTA COROLLA SEDAN 2WD 5YFBU4EE4DP2O254O

2006 HONDA CR-V SUV 4D 4WD

VIN

4T3ZF13C53U541515

JHLRD78866CO63273

www.gettoggle.com

UNDERWRITTEN BY

1st Century Casualty Company

1 Beaver Valley Road

Wilmington, DE 19803 NAIC #36404

For Roadside Assistance log in to your account and click on "Get roadside assistance".

Report a claim at www.gettoggle.com

At the scene of an accident:

1. Obtain the following:

-Name, address, and phone number of each driver, passenger, and witness. Obtain a driver's license number for each driver.

-License plate number, insurance company, and policy number of each involved vehicle.

-Photos of vehicle damage and accident scene.

2. Report the accident to the proper authorities.

3. Do not admit fault. An investigation may later reveal you were not responsible for the accident.

Need help?

Contact us via our website at www.gettoggle.com

KEEP THIS CERTIFICATE IN YOUR VEHICLE AT ALL TIMES.

THIS POLICY MEETS STATE MINIMUM COVERAGES REQUIRED BY LAW IN SECTION 16056.

TOG-AUT-CA04 1-22 TA

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Policy Notices

Attention California Policyholders

California insureds may make a written request to their insurer to designate one person, in addition to the policyholder, to receive notice of lapse, termination, expiration, nonrenewal, or cancellation of a policy for nonpayment of premium. If a notice of lapse, termination, expiration, nonrenewal, or cancellation of a policy for nonpayment of premium is sent to the named insured, the person designated by the named insured will also receive a copy of that notice.

If you want to name a third-party as the designee to receive copies of notices of lapse,

termination, expiration, nonrenewal or cancellation of your policy, in addition to you, please go to gettogggle.com and provide the following designee's information:

- Designee name
- Email Address
- Street Address, City, State and Zip

If we do not receive this information within thirty (30) days, we will assume you have declined to exercise the option to have a designee receive these notices.

Renewal Mileage Notice

The state of California requires that insurance companies provide you with the annual mileage used for rating your current policy and the annual mileage that will be used to rate your upcoming policy renewal.

Annual mileage is an estimate based on odometer information from third party sources or provided directly from you. If there is a difference between the Prior Annual Mileage and the Renewal Annual Mileage listed below, you may see a change in your renewal premium.

If you were sent a request for updated odometer information and you did not respond, the annual mileage for your vehicle(s) may be increased to the lesser of up to three mileage bands or the mileage default of 12,000. The use of this default may have impacted your renewal premium.

Please take note of the following Prior and Renewal Annual mileage figures below. These are the miles used in the rating of your policy.

Year/Make/Model	VIN	PRIOR ANNUAL MILEAGE	RENEWAL ANNUAL MILEAGE
2003 TOYOTA SIENNA	4T3ZF13C53U541515	6000	6000
2013 TOYOTA COROLLA SEDAN	5YFBU4EE4DP202540	6000	6000
2006 HONDA CR-V	JHLRD78866CO63273	8000	8000

If the updated Renewal Annual Mileage shown above is an accurate reflection of the estimated annual mileage that you expect each vehicle to be driven over the next year, no further action is needed.

If you need to correct the annual mileage information or if your mileage has changed, please contact us or visit gettogggle.com.

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Auto Insurance Declarations Page



Coverage Information

Coverage only applies to vehicles showing premium or 'Included'

Coverage	Limits	Premiums by Vehicle		
		#1	#2	#3
Protect Your Assets				
Bodily Injury Liability	\$25,000 each person \$50,000 each accident	\$147	\$81	\$99
Property Damage Liability	\$25,000 each accident	\$57	\$65	\$81
Protect Your Vehicle				
Comprehensive	Actual Cash Value Less Deductible	-	\$1,000 Ded \$24	-
Collision	Actual Cash Value Less Deductible	-	\$1,000 Ded \$128	-
Uninsured Motorist Property Damage with Collision	Actual Cash Value	-	\$6	-
Uninsured Motorist Property Damage	\$3,500 each accident	\$0 Ded \$6	-	\$0 Ded \$7
Roadside Assistance	\$75 each disablement	Included	Included	Included
Rental Reimbursement		-	-	-
Additional Equipment	Limit is \$1,000 unless another limit is specified	-	Included	-
Protect You & Your Loved Ones				
Medical Payments	\$1,000 each person	\$4	\$4	\$6
Uninsured Motorist Bodily Injury	\$15,000 each person \$30,000 each accident	\$23	\$24	\$38
Total Premium Per Vehicle		\$237	\$332	\$231

Policy and Endorsements

This section lists the policy form number and any applicable endorsements that make up your insurance contract: TOG-AUT-CA62 1-22 TA; TOG-AUT-CA60 1-22 TA; TOG-AUT-CA50 1-22 TA; TOG-AUT-CA54 1-22 TA

Fee Information

The "Fees" stated in the "Premium/Fees" section on the front apply on a per-policy, not an account basis. Your policy may include a fraud assessment fee of \$0.88 per vehicle per six months and may be subject to a \$5.00 late fee if your premium payment is not received on time. The following fee(s) may also apply: \$50 cancellation fee, \$4 installment plan fee, \$10 returned payment fee. Fees may be deemed a part of the premium under applicable state law.


Authorized Company Representative